## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Not for submission under 37 CFR 1.99)

Application Number	10/764,059	
Filing Date	January 23, 2004	
First Named Inventor	Douglas Durham	
Art Unit	2455	
Examiner Name	Faruk HAMZA	
Attorney Docket Number	15436.164.1	

Sheet	1 of 3			Attorney	/ Docket Number	ocket Number 15436.164.1	
			U.S. PATEN	Γ APPLI	CATIONS		
Examiner Initials*	Cite No.	Application Number	Filing Date		Name of Applicant of Document	Cited	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	U.S. PATENTS						
Examiner Initials*	Cite No.	Patent Number	Issue Date	ı	Name of Patentee or of Cited Document	Applicant	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No.	Foreign Patent Document	Country Code	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T 1
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	NON PATENT LITERATURE DOCUMENTS						
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published	T 1				
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	OFFICE ACTION / NOTICE OF ALLOWANCE DOCUMENTS					
Examiner Initials*	Cite No.	Application Number	Mail Date	Document		
	1	10/764,095	01/09/2008	Terminal Disclaimer		
	2	10/764,095	12/24/2008	Restriction Requirement		
	3	10/764,095	04/14/2009	Office Action		
	4	10/764,095	11/27/2009	Office Action		
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EXAMINER SIGNATURE						
Examiner Signature /Faruk Hamza/ Date Considered 07/18/2010						
*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through a citation if not in conformance and not considered. Include copy of this form with next communication to applicant.						
<sup>1</sup> Applicant is to place a check mark here if English language translation is attached.						